

FREDERICKSBURG POLICE DEPARTMENT DIRECTIVES

OPERATIONS

365.00

APPROVED: David W. Nye, Chief of Police

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AUTOMATED EXTERNAL DEFIBRILLATOR (AED)

PURPOSE – It is the policy of the Fredericksburg Police Department to provide emergency Automated External Defibrillator (AED) services whenever possible to citizens within its service area.

POLICY – The purpose of this Directive is to establish guidelines for and define the use and care of Automated External Defibrillators (AED), and to ensure the most effective and efficient delivery of AED service for persons in emergency situations where the need for an AED is required.

365.00 - Definitions – The following definitions apply to this directive:

Automated External Defibrillator (AED): A device that combines a heart monitor and defibrillator that is capable of determining, without intervention by an operator, whether defibrillation should be performed; and, upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.

<u>AED Operator</u>: Someone who has completed a training program approved by the American Heart Association in the use of the AED.

<u>AED Coordinator</u>: The AED coordinator is responsible for overseeing that the AED Operators maintain their American Heart Association Certification, plan for training classes as needed, and follow up with AEDs that need servicing. The AED Coordinator will also prepare an annual report for the Chief of Police noting any problems, number of uses, and current number of certified AED Operators.

The AED Coordinator will be appointed by the Chief of Police, and will report directly to the Support Services Division Commander.

365.01 – Assignment of the AED Units – AED Units will be assigned permanently to Patrol Vehicles as they become available and remain with that assigned cruiser at all times.

The Patrol Division Commander or their designee will be responsible for the placement of the AED Units in the police cruisers.

The Support Services Commander or their designee will be responsible for keeping any spare operational AED Units in the Communication's Section.

365.02 - Emergency Communications Center Responsibilities -

Communications personnel shall tone and simulcast on appropriate frequencies <u>all</u> <u>calls</u> for **CPR in progress** or **respiratory arrest**. The closest available officer with an AED and trained as an AED operator is responsible to acknowledge the incident and respond.

If a basic or advanced life support unit (Fire/EMS) arrives on the scene <u>before</u> the responding officer, Communications shall notify the responding officer that rescue is on the scene and to disregard response (unless a **Code 2** response is necessary for report purposes).

365.03 - Supervisor Responsibilities - If the closest officer with an AED is out on a call or en route to a call, the Watch Commander shall determine whether to reassign this officer from the previously assigned call and assign them to the AED call.

As a general rule, officers <u>may</u> be reassigned from Code 2 or lesser priority calls to respond to an AED call. It is imperative that the closest officer with an AED unit respond to the rescue call.

(If a supervisor is made aware of a problem with an AED Unit refer to section 365.08)

365.04 - Officer Responsibilities – Following State law and Fredericksburg Police Department response directives, respond Code 1 to all assigned calls for CPR in progress or respiratory arrest.

Communications will direct the officer to disregard Code 1 response if rescue arrives on the scene prior to the officer.

365.05 - Operation Procedures – Procedures to be followed for AED use are:

- Verify that the patient is unconscious, confirm absence of pulse.
- Press "ON" to turn on the AED
- Prepare the patient for electrode placement:
 - If possible, place the patient on a hard surface away from standing water or conductive material.

- Remove clothing from the patient's upper torso.
- If necessary, dry shave excessive hair from the electrode sites. Avoid cutting skin.
- Do not apply alcohol or other flammables to the skin.
- o Remove medication patches from electrode sites and wipe clean.
- Apply the electrodes to the patient's chest as directed on the electrode.
- Follow the screen messages and voice prompts provided by the AED.
- Patients with Implanted Pacemakers:
 - o If possible, place defibrillation electrodes away from the internal pacemaker generator. Treat this patient like any other patient requiring emergency care. Pacemaker pulses may prevent advisement of an appropriate shock, regardless of the patient's underlying rhythm.

Special instructions for screen & voice prompts:

- "Stand Clear" and "Analyze Now" DO NOT touch the patient, AED, cable or patches until "Check for Pulse" prompt given.
- "Stand Clear" and "Push to Shock" Operator immediately states: "I'm clear, you're clear, everybody's clear" and visually checks that no one is touching the patient; then depresses shock button.
 - Prior to defibrillation, the officer must ensure all persons are clear of the patient to prevent injury.
 - The safe use of the AED unit is the responsibility of the officer who is in control of the AED unit.
- "Connect Electrodes" Verify cable connected fully to AED. Verify patches stuck to chest. If excessive chest hair is present, remove patches, dry shave chest and use NEW patches.

365.06 - Provision of Care - Personnel shall be responsible for providing care consistent with their levels of training.

The officer may be requested to go to the hospital with the ambulance crew even though the provider on the ambulance is of higher certification. This may be necessary in order to ensure proper patient documentation and continuation of care.

Personnel shall be authorized to withhold treatment from patients in respiratory and/or cardiac arrest only when provided with documentation that the patient involved has a valid "Do Not Resuscitate Order."

Medical information concerning any individual is confidential and shall not be shared or disclosed expect for continuing medical care or for investigations by the Department of Health.

Personnel shall not leave a patient without assuring that an equal or higher level of care is provided. Informed consent shall be obtained or informed refusal of care shall be documented by responding EMS workers.

365.07 - Post Use - After the AED unit has been utilized the officer must contact the AED Coordinator to make arrangements for the data to be retrieved. Once the data has been retrieved, the AED unit can then be placed back in service.

If a problem with an AED Unit is encountered refer to 365.08.

365.08 – Inspection of the AED Unit before tour of duty – The AED Units will be inspected at the beginning of the shift by the officer assigned to the patrol vehicle where the unit is kept . The officer will make certain there are no trouble symbols and that the unit has the proper supplies, ex., Fast Response Kit, Pocket Mask, Smart Pads.

If the AED Unit should fail inspection or a problem is detected the **Officer** shall:

Notify their immediate supervisor and remove the AED Unit from service

The officer's **immediate supervisor** shall:

- Replace the AED Unit if a spare is available (Spare Units will be kept in Communications) and,
- Notify the AED Coordinator, Communications Supervisor Ms. Angela Fines, of the problem and if the AED Unit was replaced with a spare unit

The AED Coordinator shall:

 Contact the AED Contact for the Fredericksburg Fire Department and notify them of the problem so the unit can be repaired/replaced.

365.09 – Weekly Inspection of the AED Units – The inspection of all AED Units will take place in conjunction with the weekly inspection of the Patrol Vehicles.

The **Day Work Watch Commander** will complete the AED Weekly Inspection Form (Found on the server in the Form's Section) and forward it to the AED Coordinator for the Police Department, Ms. Angela Fines.

The **AED Coordinator** will forward the completed Weekly Inspection Form to the Safety Officer for the City of Fredericksburg, Ms. Loren Kato.

365.10 - Records and Reports – The following records and report shall be maintained by the AED Coordinator for a period of not less than five (5) years:

- CPR, AED training for each AED operator.
- Records of each automated external defibrillator currently in use to include maintenance records and records of safety inspections.

A police incident report shall be completed by the officer utilizing an AED for each instance where the AED is deployed <u>and</u> applied to an actual or potential patient.

365.11 - Training - Training will be provided in accordance with the State Board of Health Standards and the American Heart Association.